### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further cornindicated unless corrected be maintenance fee notification.	elow or directed otherwise i	atent, advance or n Block 1, by (a)	ders and notification specifying a new	on of maintenance fees correspondence address	will be mailed to the current s; and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for	
	E ADDRESS (Note: Use Block I for an	ny change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must				
27896 7590 11/09/2005				have its own certifica	te of mailing or transmission.	C,	
EDELL, SHAPIRO & FINNAN, LLC 1901 RESEARCH BOULEVARD SUITE 400 ROCKVILLE, MD 20850				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
12/16/2005 MBEYENE2 00		DEC	1 5 2005		-	(Depositor's name)	
01 FC:1501 02 FC:1504	1400.00 OP 300.00 OP	PATELLE	A COLUMN TO			(Signature)	
APPLICATION NO.	FILING DATE		TRST-NAMED INVE	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/829,362	04/22/2004		Christian Stock	en	0928.0053C	7074	
TITLE OF INVENTION: DE	EVICE FOR COOLING ME	MORY MODULE	ES				
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	•	\$300	\$1700	02/09/2006	
EXAM	INER	ART UN	IT (	CLASS-SUBCLASS	]		
CHERVINSKY, BORIS LEO		2835		361-704000			
	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  HE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.						
(A) NAME OF ASSIGNE	EE	(В	) RESIDENCE: (CI	TTY and STATE OR CO			
	Technologies,		Munich,			5	
					Corporation or other private gr	oup entity  Government	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.							
·				or is hereby authorized by charge the required fee(s), or credit any overpayment, to			
Advance Order - # of	Copies		Deposit Account N	umber 05-0460	charge the required fee(s), or enclose an extra c	copy of this form).	
a. Applicant claims SN	(from status indicated above) MALL ENTITY status. See 3	7 CFR 1.27.			ALL ENTITY status. See 37 C		
The Director of the USPTO i NOTE: The Issue Fee and Pu nterest as shown by the reco	s requested to apply the Issue ablication Fee (if required) wirds of the United States Pater	Fee and Publicat Il not be accepted at and Trademark	ion Fee (if any) or t from anyone other Office.	o re-apply any previous than the applicant; a reg	sly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	Andrew /.	Aldag		Date	12/15/05		
Typed of printed name	Andrew J. Alda		<del></del>	_	n No. 40,483		
This collection of information application. Confidentiality submitting the completed applications.	n is required by 37 CFR 1.31 by is governed by 35 U.S.C.   plication form to the USPTO	1. The information 122 and 37 CFR 10. Time will vary	n is required to obta 1.14. This collection depending upon the	nin or retain a benefit by n is estimated to take 12 e individual case. Any o	the public which is to file (an minutes to complete, includic comments on the amount of ti	d by the USPTO to process) ng gathering, preparing, and me you require to complete	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. DEC 1 5 2005 **Applicant** Filed TC/A.U.

10/829,362

Christian Stocken et al.

April 22, 2004

2835

Examiner

Confirmation No.

Docket No.

Customer No.

Title

Chervinsky, Boris Leo

7074

0928.0053C (3000.0053C)

054500

**Device for Cooling Memory Modules** 

## Mail Stop Issue Fee

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

# ISSUE FEE TRANSMITTAL

Transmitted herewith is an Issue Fee Transmittal (Form PTOL 85b) for the aboveidentified application.

Other:   Fees:    Issue Fee of \$1400.00     Other Fees: \$300.00 for Publication Fee.    Total fee: \$1700.00     Payment of Fees:   Check No. 9285 in the amount of \$1700.00 for the total fee is attached.   Please charge \$ to Deposit Account No. 05-0460 for the total fee. This paper is being submitted in duplicate.	Also e	Also enclosed is:						
<ul> <li>✓ Issue Fee of \$1400.00</li> <li>✓ Other Fees: \$300.00 for Publication Fee.</li> <li>Total fee: \$1700.00</li> <li>Payment of Fees:</li> <li>✓ Check No. 9285 in the amount of \$1700.00 for the total fee is attached.</li> <li>✓ Please charge \$ to Deposit Account No. 05-0460 for the total</li> </ul>			Other:					
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<ul> <li>Check No. 9285 in the amount of \$1700.00 for the total fee is attached.</li> <li>Please charge \$ to Deposit Account No. 05-0460 for the total</li> </ul>		Total:	fee: \$ <u>1700.00</u>					
attached.  Please charge \$ to Deposit Account No. 05-0460 for the total	Payment of Fees:							
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			Please charge \$ to Deposit Account No. 05-0460 for the total fee. This paper is being submitted in duplicate.					

Respectfully submitted by

EDELL, SHAPIRO & FINNAN, LLC

The Commissioner is hereby authorized to charge any additional fees that may be required, and to credit any overpayment, to Deposit Account No. 05-0460.

Dated: December 15, 2005

(301) 424-3640

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EDELL, SHAPIRO & FINNAN, LLC CUSTOMER NO. 054500 1901 Research Boulevard, Suite 400 Rockville, MD 20850 By:

Andrew J. Aldag Reg. No. 40,483